

BEST AVAILABLE COPY

MULTIPLE DEPEN. FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)				CLAIM		SERIAL NO.	10/5526446		FILING DATE				
						APPLICANT(S)							
CLAIMS													
	AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT			AS FILED		AFTER 1 ST AMENDMENT		AFTER 2 ND AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.	IND.	DEP.
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49							99						
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TOTAL IND.													
TOTAL DEP.													
TOTAL CLAIMS													
TOTAL IND. TOTAL DEP. TOTAL CLAIMS										13	14		